As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ecification	on of which (check only one item below):	
[]	is attached hereto.	
[]	was filed as United States application	
	Serial No.	
	on	
	and was amended	
	on	(if applicable)
[X]	was filed as PCT international application	
•	Number <u>PCT/AT 02/00310</u>	
	on 6 November 2002	······································
	and was amended under PCT Article 19	
	on	(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

		5.C. 117.			
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119		
PCT	AT/02/00310	6. November 2002.	K] YES [] NO		
			[]YES []NO		
			[]YES []NO		
			[]YES []NO		
			[]YES []NO		

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C()	OMBINED DECLAR neludes Reference to PC	RATION FOR PATENT A	APPLIC	CATION AND PO	OWER OF A	ATTORN POC	d P	CTAT	TORNEY'S D	OCKET NUMBER		
ap of St	hereby claim the loplication(s) design this application is lates Code, §112, I	benefit under Title; nating the United Stass not disclose in that/of I acknowledge the duarred between the filing	35, Unates of those puty to	Inited States Co America that is prior application disclose materi	Code, §120 is/are liste on(s) in the	of any United below and, in the manner provention as defin	ed Sta sofar a	ates applicates the subject the first	ect matter of t paragraph	of each of the claim of Title 35, Unit		
_	PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:											
<u> </u>		U.S. APPLICATIO	NS					STATUS	(Check One)			
U.S	S. APPLICATION NUMBER	+	U.S. FILI	ING DATE		PATENTED		PEN	NDING	ABANDONED		
		CT APPLICATIONS DESIGNATI	TNG THE	us.								
	PCT APPLICATION NO.	PCT FILING DATE				-						
(o)	all business in the Patent and Trademark Office connected therewith. (List name and registration numbers): KURT KELMAN, Registration No. 18,628 ALLISON C. COLLARD, Registration No. 22,532; EDWARD R. FREEDMAN, Registration No. 26,048; Send Correspondence to: COLLARD & ROE, P.C. 1077 Northern Boulevard CList name and registration numbers): ELIZABETH COLLARD RICHTER, Reg. No. 35,103 WILLIAM C. COLLARD, Registration No. 38,411 FREDERICK J. DORCHAK, Registration No. 29,298 Direct Telephone Calls to: (name and telephone number)											
		Roslyn	Roslyn, New York 11576						(516) 365			
2	FULL NAME OF INVENTOR	 	Jäkel			FIRST GIVEN NAME Günter			SECOND GIVI	EN NAME		
0	RESIDENCE & CITIZENSHIP		Gollenshausen			STATE OR FOREIGN COUNTRY Germany DEX			country of citizenship Germany			
1	POST OFFICE ADDRESS	POST OFFICE ADDRESS Eugen-Ortner	POSTOFFICE ADDRESS Eugen-Ortner-Strasse 28			Gollenshausen			state & zip o Germany	CODE/COUNTRY Y/D 83257		
2	FULL NAME OF INVENTOR	FAMILY NAME	FAMILY NAME			FIRST GIVEN NAME			SECOND GIVE	N NAME		
0	RESIDENCE & CITIZENSHIP	спу			STATE OR FOREIGN COUNTRY				COUNTRY OF CITIZENSHIP			
2	POST OFFICE ADDRESS	POST OFFICE ADDRESS			спу				STATE & ZIP C	ODE/COUNTRY		
2	FULL NAME OF INVENTOR	FAMILY NAME			FIRST GIVEN NAME				SECOND GIVE	N NAME		
0	RESIDENCE & CITIZENSHIP	СПУ			STATE OR FOREIGN COUNTRY				COUNTRY OF CITIZENSHIP			
3	POST OFFICE ADDRESS	POST OFFICE ADDRESS			CITY				STATE & ZIP CODE/COUNTRY			
mad	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.											
	SIGNATURE OF INVENTOR OF COLOR			SIGNATURE OF INVENTOR 202			SIGNATURE OF INVENTOR 203					
DATE	1 20 4/20		DATE			DATE						